PLEASE TYP	E OR PRINT		
☐ Ms. Mr. Artist	Scott	~ ^	(Last Name Last)
Permanent Address	8005	LAKE	eleus.
4410	Street Dayti	me Tel. ()	City 281-907
Zip	Area	Code	
Temporary or Studio Addres		ME	
	Street		City
	Dayti	me Tel. ()	
Zip	Area	Code	4
•	presently live in erve, in which cou		
Collaborator			
	(If Any)	
Artist willMuseum s	entries are not a pick up at Muse hould dispose o hould ship to ar ddress:	um. f.	ask,
to this a			

This Entry blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until June 29, 1986.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information.

Signature

DO NOT DETACH

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	1. Paintings 2. Graphics 3. Photo 4. Sculpture 5. Crafts											
	Materials											
	Oil on CANVA											
	Title PA	+ H	8+	PA	(0	01	~					
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	GRAPHICS AND PHOTOGRAPHY ONLY											
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	ACCEPTED	DO NOT	WRITE IN T	HIS SE			REJECT					
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	Price or NFS Insurance Value If NFS Only Size 54" X											
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	BEJECTED	-		BEI	ECTED	DATE						